FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P9700006526 (2)

BRANDON ELECTROLYSIS, INC.

Principal Place of Business

Mailing Address

FILED Feb 20 1998 8:00am Secretary of State



alialad

110 SOUTH L UNIT 2. SUIT BRANDON FL	_	110 South Lakewood D Unit 2. Suite 4 Brandon FL 33511	RIVE	DO NOT WRITE IN THIS 3. Date incorporated or Qualified	SPACE
- 6.		T		01/16/1997	
21 116 5	Place of Business		halle wood b	4. FEI Number 59-3426670	Applied For Not Applicable
Suite, Apt.	+3	Suite, Apt. #, etc.)	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	WDON, FR	City & State	, Fh	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24 335	Country 25 U.S.	Zip 29 33511	Country	This corporation owes or has paid the cur Personal Property Tax due June 30.	rent year Intangible
	9, Name and Address of Curr	ent Registered Agent		10. Name and Address of New Registered	Agent
MCANNALLY, WILLIAM H IV 81 Name					
420 WEST BRANDON BLVD. 82 Street Address (P.O. Box Number is Not Acceptable)					
SUITE 202					
BRANDON FL 33511 83					
			84 City		85 Zip Code
				FL	. -
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE					
12.		ND DIRECTORS (NOTE	13.	ADDITIONS/CHANGES TO OFFICERS AND	DIDECTORS IN 10
TITLE	D	DELETE	1,1 TITLE	ADDITIONS/CHANGES TO OFFICERS AND	Change Addition
NAME	BURSON, BEVERLY S		1,2 NAME		C Change C Addition
STREET ADDRESS	110 SOUTH LAKEWOOD DR	LINIT 2 SHITE 4	1.3 STREET ADDRESS		
CITY-ST-ZIP	BRANDON FL 33511	. On 2, Odile 4	1.4 CITY-ST-ZIP		
TITLE	SI THE COLL TO COLL	DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME		C Stange Notation
STREET ADDRESS			2.3 STREET ADDRESS	×	
CITY-ST-ZIP			2.4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME		_	3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY+ST-ZIP		
TITLE		DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE	_** ,	☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP	_		5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.					